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February 24, 2004

**GROUP: 1635**

**FAX NUMBER: 1-703-872-9307**

**ATTORNEY DOCKET NO.: RTS-0200**

**SERIAL NO.: 10/006,911**

**FILED: November 8, 2001**

**NUMBER OF PAGES: 13**  
(including this sheet)

**MESSAGE: Attached is an Amendment Transmittal Letter (in duplicate);  
Amendment in Response to Office Action dated December 19, 2003.**

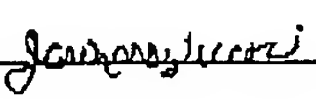
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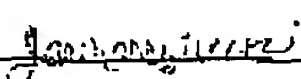
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<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>				Docket No. <b>RTS-0200</b>	
Applicant(s): Gaarde and Watt					
Serial No. <b>10/006,911</b>	Filing Date <b>November 8, 2001</b>	Examiner <b>James Schultz</b>	Group Art Unit <b>1635</b>		
Invention: <b>ANTISENSE MODULATION OF HUMAN COLLAPSin RESPONSE MEDIATOR PROTEIN 2 EXPRESSION</b>					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	13 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	1 -	3 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>
<div style="display: flex; justify-content: space-between;"><div><input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <b>50-1619</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div><div style="text-align: right;">Dated: February 24, 2004</div></div> <div style="margin-top: 20px;"><div style="display: flex; justify-content: space-between;"><div> _____ Signature  Jane Massey Licata Reg. No. 32,257 Licata &amp; Tyrrell P.C. 66 E. Main Street Marlton, NJ 08053 Tel: 856-810-1515 Fax: 856-810-1454</div><div style="border: 1px solid black; padding: 5px; width: 40%; margin-left: 20px;"><div style="font-size: small;">I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</div><div style="border-top: 1px solid black; height: 30px; margin-top: 10px;"></div><div style="text-align: center; font-size: x-small;">Signature of Person Mailing Correspondence</div><div style="border-top: 1px solid black; height: 30px; margin-top: 10px;"></div><div style="text-align: center; font-size: x-small;">Typed or Printed Name of Person Mailing Correspondence</div></div></div></div>					
CC:					

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>				<b>Docket No.</b> RTS-0200	
Applicant(s): Gaarde and Watt					
<b>Serial No.</b> 10/006,911	<b>Filing Date</b> November 8, 2001	<b>Examiner</b> James Schultz		<b>Group Art Unit</b> 1635	
Invention: ANTISENSE MODULATION OF HUMAN COLLAPSEN RESPONSE MEDIATOR PROTEIN 2 EXPRESSION					
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<b>CLAIMS AS AMENDED</b>					
	<b>CLAIMS REMAINING AFTER AMENDMENT</b>	<b>HIGHEST # PREV. PAID FOR</b>	<b>NUMBER EXTRA CLAIMS PRESENT</b>	<b>RATE</b>	<b>ADDITIONAL FEE</b>
TOTAL CLAIMS	13 -	20 =	0 x	\$18.00	\$0.00
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Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1619 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 _____ Signature		Dated: February 24, 2004			
Jane Massey Licata Reg. No. 32,257 Licata & Tyrrell P.C. 66 E. Main Street Marlton, NJ 08053 Tel: 856-810-1515 Fax: 856-810-1454		<div style="border: 1px solid black; padding: 5px;"><p>I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p><p>_____ Signature of Person Mailing Correspondence</p><p>_____ Typed or Printed Name of Person Mailing Correspondence</p></div>			
cc:					

<b>CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)</b>			Docket No. RTS-0200
Applicant(s): Gaarde and Watt			
Serial No. 10/006,911	Filing Date November 8, 2001	Examiner James Schultz	Group Art Unit 1635
Invention: ANTISENSE MODULATION OF HUMAN COLLAPSEN RESPONSE MEDIATOR PROTEIN 2 EXPRESSION			
<p>I hereby certify that this _____ <u>Reply under C.F.R. 1.116</u> _____ (Identify type of correspondence)</p> <p>is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>703-872-9307</u> )</p> <p>on <u>February 24, 2004</u> (Date)</p> <p style="text-align: right;">_____ Jane Massey Licata (Typed or Printed Name of Person Signing Certificate)</p> <p style="text-align: right;">_____ <i>Jane Massey Licata</i> (Signature)</p> <p style="text-align: center;">Note: Each paper must have its own certificate of mailing.</p>			

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RESPONSE UNDER 37 CFR 1.116  
EXPEDITED PROCEDURE  
EXAMINING GROUP 1635

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

OFFICIAL

Attorney Docket No.: RTS-0200  
Inventors: Gaarde and Watt  
Serial No.: 10/006,911  
Filing Date: November 8, 2001  
Examiner: James Schultz  
Group Art Unit: 1635  
Title: Antisense Modulation of Human Collapsin  
Response Mediator Protein 2 Expression

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I hereby certify that this paper is being facsimile  
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the date shown below.

On February 24, 2004

James Schultz  
James Massey Licata Registration No. 32,257

Commissioner for Patents  
Washington, D.C. 20231

Dear Sir:

Reply under 37 C.F.R. 1.116

This is a reply to the Office Action mailed December 19, 2003  
setting a three (3) month statutory period for response. Please  
enter the following amendments and remarks into the record.

**Amendments to the Claims** begin on page 2 of this paper.

**Remarks** begin on page 4 of this paper.